

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Design											
Doc/Data											
Equip/Tooling											
Handling/Pre											
Material											
Operator											
Offset/Set-up											
Process											
Supplier											
Training											
Transport											
Unapproved											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

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Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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FAULT CATEGORY

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		<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
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1 15615

April-04-14 10:14:43 AM

N900040100

Setup Start *NS1*

Stop *NS2*

Start Date: 4/04/14 **Start Qty:** 10.00 ***10***

Cust Item ID:

Required Date: 4/04/14 **Req'd Qty:** 10.00 ***10***

Customer:

Reference:

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

**Insp.
Stamp**

QC21- Final Inspection - Work Order Release

0.00

180

QC

Memo

0.00

Quality Control

MLJ 14-06-03

14-6-3

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Picklist Print

Page 1

April-04-14 10:14:42 AM

Work Order ID: 115615

115615

Parent Item: D2891-1

D2891-1

Parent Item Name: Support 2.25

Start Date: 4/04/14

Required Date: 4/04/14

Start Qty: 10.00

Required Qty: 10.00

Comments:

IPP C02.11.26Added P/OKJ

IPP D 08.03.19 Re-format EC verified: DD

IPP Rev:E

11.08.04 as per dwg rev.B DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
DSK076		Manufactured	No			110	Each	13.0000	0.5	5			

DSK076

D2891-1 Turning Detail

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT060	13	
104460	1	
113311	2	
113931	10	

M116430 X 5

 OK 14/05/26

DQA: _____ Date: _____



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Doc/Data									
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Training									
Transport									
Unapproved									

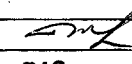
FAULT CATEGORY

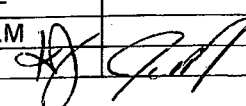
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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DART AEROSPACE LTD		Work Order: 115615
Description: Ø2.250 Support		Part Number: D2891-1
Inspection Dwg: D2891	Rev: B	Page 1 of 1

FIRST ARTICLE INSPECTION DIMENSION SHEET

				Record Actual Dimensions				
Dim	Min	Max	Go/No Go Gauge	1	2	3	4	5
HAAS Section								
AA	0.188	0.193		.188	.188	.188	.188	.188
AB	0.240	0.260		.250	.250	0.247	0.247	0.247
AC	0.115	0.150		.124	.124	0.125	0.125	0.125
AD	0.040	0.060		.050	.050	0.050	0.050	0.050
AE	0.010	0.020		.010	.010	0.010	0.010	0.010
AF	0.240	0.260		.250	.250	0.250	0.250	0.250
AG	0.290	0.310		.307	.307	0.307	0.307	0.307
AH	0.115	0.150		.137	.137	0.138	0.138	0.138
AI	0.454	0.474		.467	.467	0.464	0.464	0.464
AJ	2.779	2.789		2.784	2.784	2.784	2.784	2.784
AK	0.240	0.260		.250	.250	0.250	0.250	0.250
AL	1.002	1.042		1.040	1.040	1.040	1.040	1.040
AM	0.053	0.073		.063	.063	0.063	0.063	0.063
AN	0.257	0.262		.257	.257	.257	.257	.257
AO	1.663	1.683		1.673	1.673	1.673	1.673	1.673
AP	0.053	0.073		.063	.063	0.063	0.063	0.063
AQ	0.022	0.042		.032	.032	0.032	0.032	0.032
AR								
AS								
AT								
Accept/Reject								

Measured by:  / 14.04/05/27	DAS 08 9-89	Date: 14/05/26
Audited by: 37	DAS 9-89	Date: 14.05.21
Preliminary Approval:		Date:

Rev	Date	Change	Revised by	Approved
A	02.12.12	New Issue	KJ/RF	
B	08.04.21	Reformat	KJ/JLM	
C	12.09.26	Dwg Rev updated	KJ	

DART AEROSPACE LTD		Work Order:	115615
Description: Ø2.250 Support		Part Number:	D2891-1
Inspection Dwg: D2891		Rev: B	Page 1 of 1

FIRST ARTICLE INSPECTION DIMENSION SHEET

				Record Actual Dimensions				
Dim	Min	Max	Go/No Go Gauge	#6	#7	#8	#9	#10
HAAS Section								
AA	0.188	0.193		0.188	0.188	0.188	0.188	0.188
AB	0.240	0.260		0.247	0.248	0.248	0.248	0.248
AC	0.115	0.150		0.125	0.125	0.125	0.125	0.125
AD	0.040	0.060		0.048	0.048	0.050	0.050	0.050
AE	0.010	0.020		0.010	0.010	0.010	0.010	0.010
AF	0.240	0.260		0.250	0.250	0.250	0.250	0.250
AG	0.290	0.310		0.307	0.307	0.307	0.307	0.307
AH	0.115	0.150		0.138	0.138	0.138	0.138	0.138
AI	0.454	0.474		0.464	0.464	0.464	0.464	0.464
AJ	2.779	2.789		2.784	2.784	2.784	2.784	2.784
AK	0.240	0.260		0.250	0.250	0.250	0.250	0.250
AL	1.002	1.042		1.040	1.040	1.040	1.040	1.040
AM	0.053	0.073		0.063	0.063	0.063	0.063	0.063
AN	0.257	0.262		0.262	0.262	0.262	0.262	0.262
AO	1.663	1.683		1.673	1.673	1.673	1.673	1.673
AP	0.053	0.073		0.063	0.063	0.063	0.063	0.063
AQ	0.022	0.042		0.032	0.032	0.032	0.032	0.032
AR								
AS								
AT								
Accept/Reject								

Measured by:	H. G. B.	DAS	Date:	14/05/27
	DAS	08		
		9-89		
Audited by:	37		Date:	14.05.31
	9-89			
Preliminary Approval:			Date:	

Rev	Date	Change	Revised by	Approved
A	02.12.12	New Issue	KJ/RF	
B	08.04.21	Reformat	KJ/JLM	
C	12.09.26	Dwg Rev updated	KJ	

NOTES:

1) MATERIAL: 17-4 PH STAINLESS STEEL, H900 OR H925 CONDITION
MIN UTS = 170 KSI (38 HRC)
(REF DART SPEC. D6104)

2) FINISH: NONE

3) TOLERANCES: PER DART QSI 018 (REF X.XXX = ± 0.010) UNLESS OTHERWISE NOTED

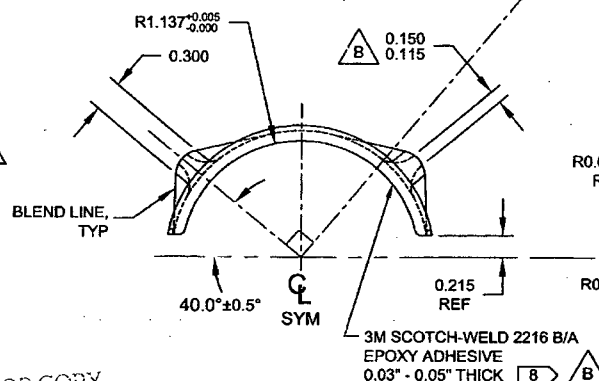
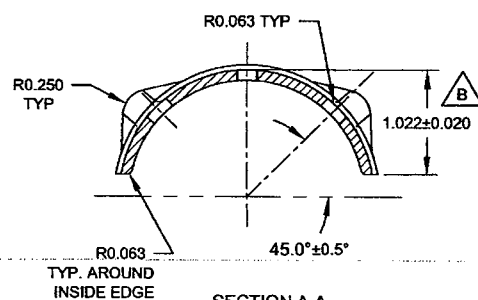
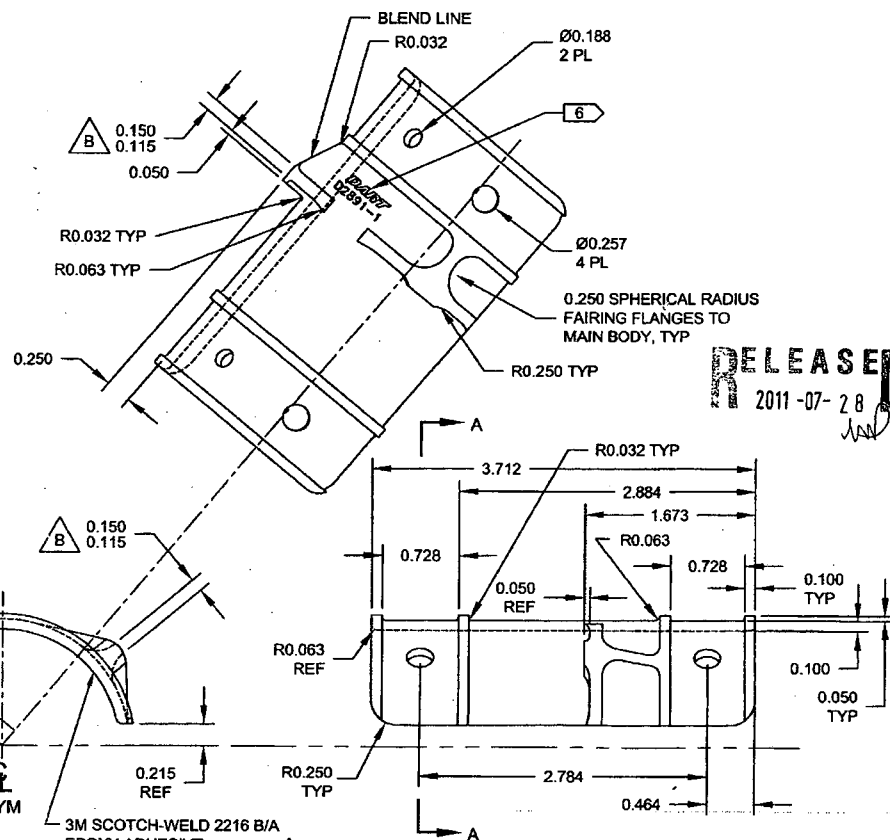
4) UNITS: INCHES UNLESS OTHERWISE NOTED







5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX

6) IDENTIFICATION: DART LOGO (PER DART SUPPLIED GRAPHIC) AND PART NUMBER IN THIS AREA WITH 0.125 HIGH LETTERING
0.010-0.020 DEEP, PER DART QSI 044 6.3.

7) WEIGHT: 0.38 lb

8) FOR THE ENTIRE INNER CONCAVE SURFACE:
ABRADE SURFACE WITH 400-GRIT SANDPAPER. REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY 0.03" TO 0.05" THICK LAYER OF 3M SCOTCH-WELD 2216 B/A ADHESIVE TO MATING SURFACE OF SUPPORT. ALLOW TO CURE FOR 24 HOURS.



B	RMV FINISH, ADD 3M 2216, ADD H925 MAT'L OPTION, UPDATE TOLERANCE (ZN D4-1.84-1.86-1)	CP	11.07.15
A	NEW ISSUE	CP	00.11.17
REV.	DESCRIPTION	BY	DATE
DESIGN		DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.		DRAWING NO.	REV.
DATE	11.07.15	D2891	SHEET 1 OF 1
		TITLE	SCALE
		Ø2.250 SUPPORT	N
		COPYRIGHT © 2000 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

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RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 115615

D2891-1 SUPPORT

RELEASED
2011-07-28